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APR 13 2006

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TO: Examiner S.A. Cangialosi
Group Art Unit 3621

FAX NO.: 571 273 8300

FROM: Shawn L. Peterson

USER ID: 8061

CLIENT: 1772

MATTER: 14418US03

Number of Pages This Transmission (Including Cover Page): 13

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Shawn L. Peterson
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PTO/SB/21 (09-04)

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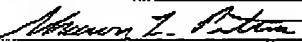
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TRANSMITTAL FORM		Application Number	10/648,707	
		Filing Date	August 26, 2003	
		First Named Inventor	Mahany	
		Art Unit	3621	
		Examiner Name	S.A. Cangialosi	
Total Number of Pages in This Submission		12	Attorney Docket Number	14418US03

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response - 8 pages <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Return-Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	McAndrews Held & Malloy, Ltd.		
Signature			
Printed Name	Shawn L. Peterson		
Date	April 13, 2006		

CERTIFICATE OF FAX TRANSMITTAL

I hereby certify that this correspondence is being sent via facsimile to Examiner S.A. Cangialosi at the United States Patent and Trademark Office, fax No. 571 273 8300, on April 13, 2006.

Name (Print/type)	Shawn L. Peterson	Registration No. (Attorney/Agent)	44,286
Signature		Date	April 13, 2006

FROM McANDREWS, HELD, & MALLOY

(THU) 4.13'06 11:28/ST. 11:27/NO. 4861050363 P 3

PTO/SB/17 (01-06)

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Fees pursuant to the consolidated Appropriates Act, 2005 (H.R. 4818).
FEE TRANSMITTAL
for FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ **130.00**)

Complete If Known

Application Number	10/648,707	RECEIVED
Filing Date	August 26, 2003	CENTRAL FAX CENTER
First Named Inventor	Mahany	
Examiner Name	S.A. Cangialosi	APR 13 2006
Art Unit	3621	
Attorney Docket No.		14418US03

METHOD OF PAYMENT (check all that apply)

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Deposit Account Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

FILING FEES **SEARCH FEES** **EXAMINATION FEES**

Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	600	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
-20 or HP	x	=				
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
-3 or HP	x	=				
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100	/50	(round up to a whole number)	x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)
 Other (e.g., late filing surcharge): Terminal Disclaimer 130.00

SUBMITTED BY

Signature	<u>Shawn L. Peterson</u>	Registration No. (Attorney/Agent)	44,286	Telephone	(312)775-8000
Name (print/type)	Shawn L. Peterson		Date	April 13, 2003	